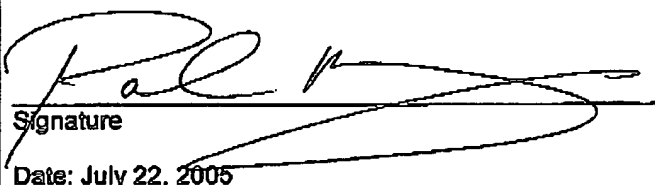
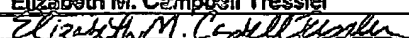


TRANSMITTAL FORM		Application Number		10/644,720		RECEIVED CENTRAL FAX CENTER JUL 22 2005	
		Filing Date		August 20, 2003			
		First Named Inventor		Jeffrey C. Hessenberger			
		Art Unit		3725			
		Examiner Name		Shelley M. Self			
Total Number of Pages in This Submission		17		Attorney Docket Number		066042-9398-01	
ENCLOSURES (check all that apply) <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> Before Final: Amendment – 15 pages <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declarations <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO-1449 Form(s) <input type="checkbox"/> Cited References <input type="checkbox"/> Certified Copy of Priority Document <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Status Letter <input type="checkbox"/> Other:				PETITION FOR EXTENSION OF TIME This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. <input type="checkbox"/> Applicant(s) claims small entity status under 37 CFR 1.27. <input checked="" type="checkbox"/> Applicant(s) petitions for a one-month extension of time and pay the fee of \$120.00 (37 CFR 1.17(a)(1)-(5)). <input type="checkbox"/> Applicant(s) believes that no petition for an extension of time is necessary (37 CFR 1.36(c)); however, applicant(s) hereby petition for sufficient extension of time to render the present submission timely.			
CLAIMS FEES							
<input checked="" type="checkbox"/> No additional claim fee is required.							
				Small Entity		Large Entity	
	Claims Remaining After Amendment		Highest Number Previously Paid For	Extra Claims Present	Rate	Addit. Claim Fee	Rate
Total	40	-	40	=0	x 25= \$	x 50= \$	x 50= \$
Independent	2	-	5	=0	x 100= \$	x 200= \$	x 200= \$
<input type="checkbox"/> First Presentation of Multiple Claim				+ 180= \$	+ 360= \$		
FEES							
<input type="checkbox"/> Additional Claim Fee						\$0.00	
<input checked="" type="checkbox"/> Extension fee for one-month						\$120.00	
<input type="checkbox"/> Information Disclosure Statement						\$0.00	
<input type="checkbox"/> Surcharge for Missing Parts – Declaration						\$0.00	
<input type="checkbox"/> Terminal Disclaimer						\$0.00	
TOTAL FEES						\$120.00	
PAYMENT OF FEES							
<input type="checkbox"/> A check in the amount of \$ is enclosed.							
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 13-3080. Duplicate copy of this transmittal enclosed for this purpose.							
<input checked="" type="checkbox"/> The Director is authorized to charge Deposit Account Number 13-3080 in the amount of \$120.00.							
SIGNATURE OF ATTORNEY							
Paul M. McGinley, Reg. No. 55,443 MICHAEL BEST & FRIEDRICH, LLP 100 East Wisconsin Avenue Milwaukee, Wisconsin 53202-4108 Telephone: (312) 222-0800				 Signature Date: July 22, 2005			
CERTIFICATE OF TRANSMISSION/MAILING							
I hereby certify that this correspondence is:							
<input checked="" type="checkbox"/> being facsimile transmitted to the USPTO, facsimile number (571) 273-8300							
<input type="checkbox"/> deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below							
Typed or printed name				Elizabeth M. Campbell Tressler			
Signature				 Date: July 22, 2005			

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JUL 22 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
Group Art Unit 3725

In re

Patent Application of

Jeffrey C. Hessenberger, et al.

Application No. 10/644,720

Confirmation No. 6121

Filed: August 20, 2003

Examiner: Shelley M. Self

"ROUTER"

I, Elizabeth M. Campbell Tressler, hereby certify that this correspondence is being deposited with the US Postal Service as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being transmitted via facsimile to the USPTO (571) 273-8300, on the date of my signature.


Signature

7/22/2005
Date of Signature

AMENDMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This Amendment responds to the Office action mailed April 6, 2005. Applicants hereby request a one-month extension of time to extend the period for reply until August 6, 2005. Please charge Deposit Account No. 13-3080 in the amount of \$120.00 in payment of the fee required under 37 C.F.R. 1.17(a)(1). Please charge any required fees or credit any overpayment to Deposit Account No. 13-3080.

Please amend the application as follows:

Amendments to the Claims begins on page 2 of this paper.

Remarks begin on page 10 of this paper.

Conclusion begins on page 15 of this paper.

07/25/2005 HVUONG1 00000025 133080 10644720

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